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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional application under 37 CFR 1.53(b))</small>		Attorney Docket No.: First Named Inventor: Title:	1282-8CIP Ronald P. Spinello DENTAL ANESTHETIC INJECTION APPARATUS AND METHODS FOR ADMINISTERING DENTAL INJECTIONS EV 171218511 US																																						
APPLICATION ELEMENTS <small>See MPEP chapter 6000 concerning design patent application contents</small>			ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231																																						
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(submit an original, and a duplicate for fee processing)</small></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status <small>See 37 CFR 1.27</small></p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages - 45] <small>(preferred arrangement set forth below, MPEP 1503.01)</small> - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claims - Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawings(s) (37 CFR 1.152) [Total Sheets - 24]</p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages - 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) a. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior appl., see 37 CFR 1.63(d)(2) and 1.33(b)</small></p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on i. <input type="checkbox"/> CD-ROM or CD-R (2 copies or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p>																																									
ACCOMPANYING APPLICATION PARTS																																									
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS) PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(should be specifically itemized)</small></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (<i>if foreign priority is claimed</i>)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B) <small>(Applicant must attach form PTO/SB/35 or its equivalent)</small></p> <p>17. <input checked="" type="checkbox"/> Other ...PTO-2038 Form.....</p>																																									
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application No. <u>10/347,668</u></p> <p>Prior application information: Examiner: _____ Group Art Unit: <u>3763</u></p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																																									
19. CORRESPONDENCE ADDRESS																																									
<p><input type="checkbox"/> Customer Number or Bar Code Label <small>(Insert Customer No. or Attach bar code label here)</small> or <input checked="" type="checkbox"/> Correspondence address below</p> <table border="1"> <tr> <td>Name</td> <td colspan="5">GALGANO & BURKE</td> </tr> <tr> <td>Address</td> <td colspan="5">300 Rabro Drive, Suite 135</td> </tr> <tr> <td>City</td> <td>Hauppauge</td> <td>State</td> <td>New York</td> <td>Zip Code</td> <td>11788</td> </tr> <tr> <td>Country</td> <td>USA</td> <td>Telephone</td> <td>631-582-6161</td> <td>Fax</td> <td>631-582-6191</td> </tr> <tr> <td>Name (Print/Type)</td> <td>Daniel P. Burke</td> <td>Registration No. (Attorney/Agent)</td> <td colspan="3">30,735</td> </tr> <tr> <td>Signature</td> <td colspan="2"></td> <td>Date</td> <td>9/17/03</td> <td>September 17, 2003</td> </tr> </table>						Name	GALGANO & BURKE					Address	300 Rabro Drive, Suite 135					City	Hauppauge	State	New York	Zip Code	11788	Country	USA	Telephone	631-582-6161	Fax	631-582-6191	Name (Print/Type)	Daniel P. Burke	Registration No. (Attorney/Agent)	30,735			Signature			Date	9/17/03	September 17, 2003
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FEE TRANSMITTAL FOR FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status.

See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$642.00)

Application Number:	Complete If Known
To Be Assigned	
Filing Date:	
September 17, 2003	
First Named Inventor:	
Ronald P. Spinello	
Examiner Name:	
Group Art Unit:	
3763	
Attorney Docket No.:	
1282-BCIP	

METHOD OF PAYMENT (check all that apply)
 Check Credit Card Money Order Other None
Deposit Account:

Deposit Account Number: 07-0130

Deposit Account Name: Galgano & Burke

The Commissioner is authorized to: (check all that apply)

-
- Charge fee(s) indicated below
-
- Credit any overpayments
-
- Charge any additional fee(s) during the pendency of this application except for issue fee
-
- Charge fee(s) indicated below, except for filing fee to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	375.00		
1002 330	2002 165	Design filing fee	165.00		
1003 520	2003 260	Plant filing fee	260.00		
1004 750	2004 375	Reissue filing fee	375.00		
1005 160	2005 80	Provisional filing fee	80.00		

SUBTOTAL (1) (\$ 375.00)**2. EXTRA CLAIMS FEES FOR UTILITY & REISSUE**

Extra Claims below	Fee from	Fee Paid
Claims		

Total Claims 45 - 20** = 25 x 9.00 = 225.

Independent Claims 4 - 3** = 1 x 42.00 = 42.

Multiple Dependent 0 = 0.00

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20 independent claims in excess of 3		
1201 84	2201 42	Multiple dependent claim, if not paid		
1203 280	2203 140	**Reissue independent claims over original patent		
1204 84	2204 42	**Reissue dependent claims in excess of 20 and over original patent		
1205 18	2205 9	**Reissue claims in excess of 20 and over original patent		

SUBTOTAL (2) (\$267.00)

**for number previously paid, if greater;

For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES****Large Entity** **Small Entity**

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1805 2520	1812 2520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1840*	1805 1840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1450	2254 725	Extension for reply within fourth month	
1255 1970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1510	1451 1510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1300	2453 650	Petition to revive - unintentional	
1501 1300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection 37 CFR §1.129(e)	
1810 750	2810 375	For each additional invention to be examined 37 CFR §1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify) _____

SUBTOTAL (3) (\$0.00)

*Reduced by Basic Filing Fee Paid

SUBMITTED BY**COMPLETE (If applicable)**

Name (Print/Type) Daniel P. Burke

Registration No. 30,735

Telephone: 631-582-6161

Signature

Date: September 17, 2003

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